

**SECOND OFF-SITE CORRECTIVE ACTION PLAN  
ASSESSMENT**

of

**LAKE CITY CORRECTIONAL FACILITY**

for the

Physical and Mental Health Survey  
Conducted October 10-12, 2017

**CMA STAFF**

Lynne Babchuck, LCSW

CAP Assessment Distributed on October 5, 2018

## **CAP Assessment of Lake City Correctional Facility**

### **I. Overview**

On October 10-12, 2017, the Correctional Medical Authority (CMA) conducted an on-site physical and mental health survey of Lake City Correctional Facility (LCCF). The survey report was distributed on November 7, 2017. In December 2017, LCCF submitted and the CMA approved, the institutional corrective action plan (CAP) which outlined the efforts to be undertaken to address the findings of the October 2017 survey. These efforts included in-service training, physical plant improvements, and the monitoring of applicable medical records for a period of no less than 90 days.

On March 23, 2018, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, CMA staff conducted an on-site CAP assessment on April 24, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. The CAP closure files revealed sufficient evidence to determine that 5 of 5 physical health findings and 9 of 15 mental health findings were corrected.

On July 24, 2018, CMA staff requested access to monitoring documents to assist in determining if an on-site or off-site assessment should be conducted. Based on the documents provided, CMA staff conducted an off-site CAP assessment on October 1, 2018 to evaluate the effectiveness of corrective actions taken by institutional staff. Items II and III below describe the outcome of the CMA's evaluation of the institution's efforts to address the survey findings.

### **II. Physical Health Assessment Summary**

All physical health findings closed at the first CAP assessment.

### **III. Mental Health Assessment Summary**

The CAP closure files revealed evidence to determine that 1 of 6 mental health findings were corrected. Five mental health findings will remain open.

| <b>Finding</b>  | <b>CAP Evaluation Outcome</b>  |
|---|--|
| <p><b><u>SELF-HARM OBSERVATION STATUS (SHOS)</u></b></p> <p><b>A comprehensive review of 3 Self-harm Observation Status (SHOS) admissions revealed the following deficiencies:</b></p> <p><b>MH-1: In 2 records, SHOS orders were not cosigned by the next working day.</b></p> | <p><b>MH-1, MH-2, &amp; MH-3 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however a review of records provided by the institution indicated an acceptable level of compliance had not been met. MH-1, MH-2, &amp; MH-3 will remain open.</p> |

| Finding   | CAP Evaluation Outcome |
|---|------------------------|
| <p><b>MH-2:</b> In 1 record, documentation did not indicate the inmate was observed at the frequency ordered by the clinician.</p> <p><b>MH-3:</b> In 1 record, the “Inpatient Mental Health Daily Nursing Evaluation” (DC4-673B) was not completed once per shift.</p> |                        |

| Finding  | CAP Evaluation Outcome  |
|--|---|
| <p><b><u>OUTPATIENT PSYCHOTROPIC MEDICATION PRACTICES</u></b></p> <p>A comprehensive review of 16 outpatient records revealed the following deficiencies:</p> <p><b>MH-9:</b> In 4 of 15 records, the medication ordered was not appropriate for the symptoms/diagnosis.</p> <p><b>MH-10:</b> In 2 of 2 applicable records, there was no evidence of nursing education provided to the inmate after 2 consecutive medication refusals or 5 in one month.</p> | <p><b>MH-9 CLOSED</b></p> <p>Adequate evidence of in-service training and documentation of correction were provided to close MH-9.</p> <p><b>MH-10 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-10 will remain open.</p> |

| Finding  | CAP Evaluation Outcome   |
|--|--|
| <p><b><u>AFTERCARE PLANNING</u></b></p> <p><b>MH-14:</b> In 2 of 6 records, consent to release information for continuity of care was not completed.</p> | <p><b>MH-14 OPEN</b></p> <p>Adequate evidence of in-service training was provided, however there were no applicable episodes available for review. MH-14 will remain open.</p> |

#### IV. Conclusion

All physical health portions are closed. Mental health findings MH-1, MH-2, MH-3, MH-10, and MH-14 will remain open.

Until appropriate corrective actions are undertaken by staff and the results of those corrections reviewed by the CMA, this CAP will remain open. As some of the necessary steps to correct findings require further institutional monitoring, closure may take as long as three months. Follow-up assessment by the CMA will most likely take place through an off-site visit, but the option remains open to conduct an on-site evaluation.